Approved for use through 0830/2007. OMB 0661-0031

U.S. Patient and Transdemack Office; D. S. DEPARMENT OF COMMERCE
Under the paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless if displays a wall OMB control number.

PETITI	ON FOR EXTENSION OF TIME UNDER	Docket Number (Optional	Docket Number (Optional)		
	FY 2006	RL-2000	RL-2000		
	Fees pursuant to the Consolidated Appropriations Act,	Filed Combons	2 2003		
	ion Number 10/654,203	Filed September	3, 2003		
	xidation Resistant Ferritic St	tainless Ste			
Art Unit 1742			Examiner J. Ro	9	
This is a applicat	request under the provisions of 37 CFR 1.136 on.	6(a) to extend the	period for filing a reply in the	above identified	
The req	uested extension and fee are as follows (check	k time period desi	red and enter the appropriate	fee below):	
		<u>Fee</u>	Small Entity Fee		
	One month (37 CFR 1.17(a)(1))	\$120	\$60	\$	
	Two months (37 CFR 1.17(a)(2))	\$450	\$225	s	
1	Three months (37 CFR 1.17(a)(3))	\$1020	\$510	s_1,020.00	
1	Four months (37 CFR 1.17(a)(4))	\$1590	\$795	s	
[Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	s	
Applicant claims small entity status. See 37 CFR 1.27.					
A check in the amount of the fee is enclosed.					
Payment by credit card. Form PTO-2038 is attached.					
The Director has already been authorized to charge fees in this application to a Deposit Account.					
The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 11-1110 I have enclosed a duplicate copy of this sheet.					
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.					
I am the applicant/inventor.					
assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96).					
x attorney or agent of record. Registration Number 36,360					
attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34					
_/	hal n.hl		August 2	3, 2007	
	Signature			Date	
	Mark R. Leslie			(412) 355-6271	
	Typed or printed name		Telephon	Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representativa(e) are required. Submit multiple forms if more than one signature is required, see below.					
Total of forms are submitted.					
his collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the					

This collection of informations in sequence by 3 C PF 1, 139(s), the information is required to octain or retain a berefit by the pulsa when is a femal to late (I per 1) to the property of t